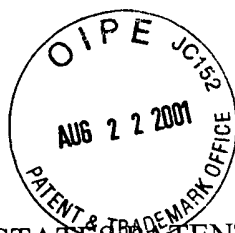


P20904.A07



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Pierre CHAMBAT et al.

Group Art Unit: 3738

Serial No : 09/832,874

Examiner: Bruce Snow

Filed : April 12, 2001

For : KNEE PROSTHESIS WITH A ROTATIONAL PLATE

#6
ARIVERS
8/28/01

REQUEST FOR EXAMINER'S APPROVAL OF DRAWING CORRECTION

Commissioner of Patents and Trademarks
Washington, DC 20231

Sir:

The drawings have been amended by deleting figures 6-8 and re-numbering figures 9-32 as figures 6-29, respectively. This amendment corresponds to changes made in the parent application and is consistent with changes made in the descriptive portion of the specification.

The Examiner's approval of these changes is requested. Furthermore, since these changes are minor in nature, a complete set of the formal drawings reflecting these changes is being filed concurrently herewith.

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P20904.A07

Should there be any questions, the Examiner is invited to contact the undersigned at the below-listed telephone number.

Respectfully submitted,
Pierre CHAMBAT et al.



Reg. No. 45,294

Neil F. Greenblum
Reg. No. 28,294

August 22, 2001
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3738\$

Attorney Docket No. P20904

In re application of: P. CHAMBAT et al.

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Filed: April 12, 2001

For: KNEE PROSTHESIS WITH A ROTATIONAL PLATE

THE COMMISSIONER OF PATENTS AND TRADEMARKS
 Washington, D.C. 20231

Box Non-Fee
 Group Art Unit: 3738

Examiner: B. Snow

Sir:

Transmitted herewith is a Preliminary Amendment in the above-captioned application.

- ☒ Small Entity Status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously filed.
☐ A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.
☒ An Information Disclosure Statement, PTO Form 1449.
☐ No additional fee is required.
☒ Request for Examiner's Approval of Drawing Correction (w/eleven sheets of drawings).

The fee has been calculated as shown below:

Claims After Amendment	No. Claims Previously Paid For	Present Extra	Small Entity		Other Than A Small Entity	
			Rate	Fee	Rate	Fee
Total Claims: 29	*20	9	x 9=	\$81.00	x 18=	\$
Indep. Claims: 1	**3	0	x 40=	\$0.00	x 80=	\$
Multiple Dependent Claims Presented			+135=	\$0.00	+270=	\$
Extension Fees for Month				\$0.00		\$
Total:				\$81.00	Total:	\$

*If less than 20, write 20

**If less than 3, write 3

- ☐ Please charge my Deposit Account No. 19-0089 in the amount of \$_____.
☒ A Check in the amount of \$ 81.00 to cover the filing fee is included.
☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-0089.
☒ Any additional filing fees required under 37 C.F.R. 1.16.
☒ Any patent application processing fees under 37 C.F.R. 1.17, including any required extension of time fees in any concurrent or future reply requiring a petition for extension of time for its timely submission (37 CFR 1.136)(a)(3).

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